State of Michigan Michigan Gaming Control Board Office of the Executive Director P.O. Box 30786 Lansing, MI 48909 Phone: (313) 456-4940 Fax: (313) 456-3405

Millionaire Party Financial Statement

All game records <u>must</u> be submitted to the Board by the 10th day of the month following the licensed gaming event.

Email: Millionaireparty@michigan.gov www.michigan.gov/mgcb

COMPLETION OF THIS FORM IS RECOMMENDED PRIOR TO PAYMENT TO A LOCATION OR SUPPLIER TO ENSURE COMPLIANCE WITH MILLIONAIRE PARTY ADMINISTRATIVE RULES.

Ο	rganization Na	ame				Event Date(s)	Organization ID No.	
Mailing Address				City & State		ZIP Code	License Number	
	Include only revenue and expenses directly related to the lice					ed gaming event		
	Revenue:	Include only revenue and expenses directly related to the licensed gaming event. Revenue:						
	1. Chip Sales/Buy Ins/Rebuys:							
		Day 1	Day 2	Day 3	Day 4			
	2 Total (a	dd Dave 1 2 3	8.4)	<u>I</u>	_			
	2. Total (add Days 1, 2, 3, & 4) 3. Donated Prizes						_	
	4. Total Revenue						_	
	Payout/Prizes/Seed:							
N /	5. Cash Payout/Prizes/Seed Amount (total from all days)							
I	6. Merchandise Prizes (include donated prizes)						_	
L	7. Total Payout/Prizes/Seed Amount (add lines 5 & 6)						_	
L	8. Gross Profit/(Loss) (subtract line 7 from line 4)							
0	9. Minimum gross profit amount to be retained by Charitable Organization (55% of line 8)							
N A	10. Maximum allowable expense amount (45% of line 8)*							
I	*Note:	*Note: This amount may be used to pay for expenses (examples: worker pay,						
R		advertising, location rental fee, equipment and supply rental, other expenses), not to include the license fee.						
E P			e.					
Α	A 11 Worker Compensation							
R	ਸ T 12. Advertising						_	
Y	Y 13. Location Rental Fee (total from all days)						_	
	14. Equipment and Supply Rental						_	
	15. Other Expenses						_	
	16. Total Expenses (add lines 11, 12, 13, 14 & 15) **						<u> </u>	
	(**Note: total expenses amount should not exceed line 10)							
	17. Net Profit/Loss (subtract line 16 from line 8)							
	18. Total Amount of Start Cash Deposited						<u> </u>	
	19. Total Amount of Actual Deposits (total from all days)						_	
	20. Licens	e Fee Amount					_	
O T	O Were charity game tickets or raffle tickets sold at the licensed gaming event?					Yes	☐ No	
H E	If yes, please visit Charitable Gaming's website at www.michigan.gov/cg or call (517) 335-5780 to obtain the applicable							
R I	Financial Statement, which needs to be completed and filed with the Charitable Gaming Division.							
F	As the principal officer for the organization, I hereby certify that the information on this financial statement is true, correct, and complete to the best of my knowledge; that the proceeds from the licensed gaming event are used in accordance with Section 9 of Act 382 of the							
R	directives of the Michigan Carning Control Board.							
M A	Signature of	Principal Officer			Title		Date	
T I								
O N								